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ARIZONA CORPORATION COMMISSION
1200 W. Washington - Hrg. Div./Docket
Phoenix, Arizona 85802-29967 S 7 d 3 MM

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PS Form **3811**, December 1994

102595-99-B-0223 Domestic Return Receipt

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6 Signaffine (Addressee or Agent)	5. Received By: (Print Name)	RN Phoenix, AZ 63012-2913	Suite 2600	3003 N. Central Avenue	Fimothy Berg	pletec 3. Arricle Addressec. 10:	o delivered.	☐ Write 'Return Receipt Requested' on the matiplece below the article number. ☐ The Return Receipt will show to whom the article was delivered and the date	card to you.  Card to you.  Card to you.  Card to you.	Complete items 3, 44, and 4b.     Complete items 3, 44, and 4b.     D-Print your name and address on the reverse of this form so that we can return this	S ☐ Complete items 1 and/or 2 for additional services	SENDER:
	8. Addressee's Address (Only if requested and fee is paid)	7. Date of Deriver 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2	t for Merchandise □	☐ Express Mail ☐ Insured	pe	14a. Article Number 209932200056507131			on the back if space does not  2. [I] Restricted Delivery	this form so that we can return this		lako wish to receive the follow-